

RESIDENTIAL LEASE APPLICATION

Forty-Fifth Street Properties, LLC ■ 2418 S. Hoover ■ Wichita, KS 67215
OFFICE 316-945-3527 FAX 316-942-3119 MIKE 316-516-5298

Name _____ Name of Spouse/CoTenant _____

Married &/or Divorced Names used in last 5 years _____ Married &/or Divorced Names used in last 5 years _____

Birth Date _____ Social Security # _____ Birth Date _____ Social Security # _____

Present Address _____ From - To _____ City _____ State _____ Zip Code _____

Home Telephone Number _____ Work or Cell Number _____ Home Telephone Number _____ Work or Cell Number _____

OTHERS OCCUPYING UNIT:

Name _____ Relationship to Lessee _____ Birth Date _____

Name _____ Relationship to Lessee _____ Birth Date _____

Name _____ Relationship to Lessee _____ Birth Date _____

Have you ever been evicted? YES NO

Why are you leaving your current rental property? _____

Have you given present Landlord notice to vacate? YES NO

Present Landlord/Phone Number _____ Rental Address _____ Occupancy Dates _____

Previous Landlord/Phone Number _____ Rental Address _____ Occupancy Dates _____

Employment:

Name of Employer _____

Address _____ Phone Number _____

Position _____ Start Date _____ Income/Mo. _____

Spouse/CoTenant Employment:

Name of Spouse/CoTenant Employer _____

Address _____ Phone Number _____

Position _____ Start Date _____ Income/Mo. _____

Credit and Personal References:

Personal _____ Address _____ Telephone _____

Personal _____ Address _____ Telephone _____

Creditor _____ Address _____ Telephone _____

Creditor _____ Address _____ Telephone _____

Name of bank with your checking account _____ Account # _____

Do you have a good credit history? _____

Do you have any pets? _____ **How many?** _____ **What kind?** _____

Pursuant to K.S.A.53-601, the undersigned(s) declares that under penalty of perjury that the foregoing is true and correct. The undersigned(s) authorize a background check and acknowledge they are entitled to a copy of any adverse information by requesting same.

Applicant _____ Date _____ Co-Applicant _____ Date _____

Expected Date of Occupancy _____ Address of Unit _____